

**REQUEST  
FOR  
CONTINUED EXAMINATION (RCE)  
TRANSMITTAL**

Address to:  
Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Application Number	10/643,045
Filing Date	August 18, 2003
First Named Inventor	Dennis J. Gallant
Art Unit	3751
Examiner Name	Robert M. Fetsuga
Attorney Docket Number	7175-73311

**This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.**

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- a. ☐ Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on \_\_\_\_\_
- ii. ☐ Other \_\_\_\_\_
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- iii. ☐ Information Disclosure Statement (IDS)
- ii. ☐ Affidavit(s)/Declaration(s)
- iv. ☐ Other \_\_\_\_\_
2. **Miscellaneous**
- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of \_\_\_\_\_ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. ☐ Other \_\_\_\_\_
3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 10-0435
- i. ☒ RCE fee required under 37 CFR 1.17(e)
- ii. ☒ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☒ Other Any other fees due
- b. ☒ Check in the amount of \$ 790.00 enclosed
- c. ☐ Payment by credit card (Form PTO-2038 enclosed)

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED**

Name (Print / Type)	Dilip A. Kulkarni	Registration No. (Attorney / Agent)	27,510
Signature	<i>Dilip A. Kulkarni</i>	Date	11-2-04

**CERTIFICATE OF MAILING OR TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print / Type)	Karla L. Mays	Date	11-2-04
Signature	<i>Karla L. Mays</i>		

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing the burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

11/08/2004 HAL111 00000057 10643045

01 FC:1801

790.00 0P



# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) \$790.00

## Complete if Known

Application Number	10/643,045
Filing Date	August 18, 2003
First Named Inventor	Dennis J. Gallant
Examiner Name	Robert M. Fetsuga
Art Unit	3751
Attorney Docket No.	7175-73311

## METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None

☒ Deposit Account:

Deposit  
Account  
Number

10-0435

Deposit  
Account  
Name

BARNES & THORNBURG LLP

The Director is authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☒ Credit any overpayments

☒ Charge any additional fee(s) or any underpayment of fee(s)

☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION

### 1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	790	2001	395	Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)				(\$)	

### 2. EXTRA CLAIM FEES FOR UTILITY AND

Extra Claims		Fee from below	Fee Paid
Total Claims	- 20** =		
	0	X	0.00
Independent Claims	- 3** =	Fee from below	Fee Paid
	0		
		X	0.00
Multiple Dependent			

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	88	2201	44	Independent claims in excess of 3	
1203	300	2203	150	Multiple dependent claim, if not paid	
1204	88	2204	44	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$)	\$0.00

\*\*or number previously paid, if greater; For Reissues, see above

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non - English specification	
1812	2,520	1812	2,520	For filing a request for <i>ex parte</i> reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	430	2252	215	Extension for reply within second month	
1253	980	2253	490	Extension for reply within third month	
1254	1,530	2254	765	Extension for reply within fourth month	
1255	2,080	2255	1,040	Extension for reply within fifth month	
1401	340	2401	170	Notice of Appeal	
1402	340	2402	170	Filing a brief in support of an appeal	
1403	300	2403	150	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,370	2453	685	Petition to revive - unintentional	
1501	1,370	2501	685	Utility issue fee (or reissue)	
1502	490	2502	245	Design issue fee	
1503	660	2503	330	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR § 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Statement	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	
1801	790	2801	395	Request for Continued Examination (RCE)	790.00
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify)					

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$) \$790.00


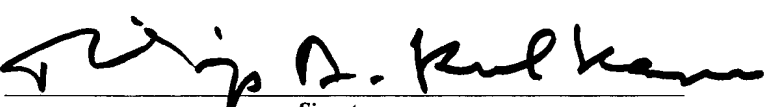
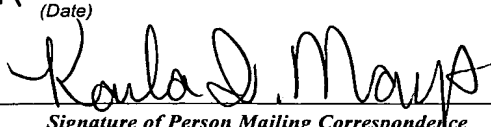
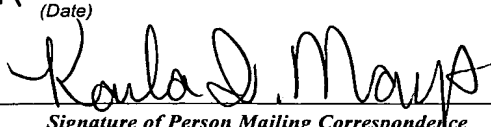
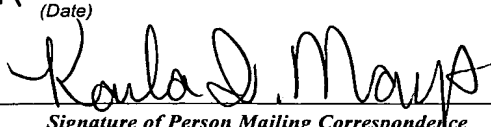
## SUBMITTED BY

Name (Print/Type)	Dilip A. Kulkarni	Registration No. (Attorney/Agent)	27,510	Telephone	(317) 231-7419
Signature		Date	11-2-04		

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on**

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

<b>AMENDMENT TRANSMITTAL LETTER (Large Entity)</b>				Docket No. <b>7175-73311</b>							
Applicant(s): <b>Dennis J. Gallant</b>											
Application No. <b>10/643,045</b>	Filing Date <b>August 18, 2003</b>	Examiner <b>Robert M. Fetsuga</b>	Customer No. <b>23643</b>	Group Art Unit <b>3751</b>	Confirmation No. <b>3106</b>						
Invention: <b>PERSONAL CARE MODULE</b>											
 <b>COMMISSIONER FOR PATENTS:</b>											
Transmitted herewith is an amendment in the above-identified application.											
The fee has been calculated and is transmitted as shown below.											
<b>CLAIMS AS AMENDED</b>											
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE						
TOTAL CLAIMS	15 -	41 =	0 x	\$18.00	\$0.00						
INDEP. CLAIMS	2 -	5 =	0 x	\$88.00	\$0.00						
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00						
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>						
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input checked="" type="checkbox"/> A check in the amount of <b>\$790.00</b> to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account <b>10-0435</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038.											
<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>											
 _____ Signature			Dated: <b>11-2-04</b>								
<b>Dilip A. Kulkarni</b> <b>BARNES &amp; THORNBURG LLP</b> 11 S. Meridian Street Indianapolis, IN 46204 (317) 231-7419  Attorney Reg. No. 27,510			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td style="text-align: center;"> <b>11-2-04</b>          (Date)       </td> <td style="text-align: center;">           Signature of Person Mailing Correspondence       </td> </tr> <tr> <td colspan="2" style="text-align: center;"> <b>Karla I. Mays</b>          Typed or Printed Name of Person Mailing Correspondence       </td> </tr> </table>			I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		<b>11-2-04</b> (Date)	 Signature of Person Mailing Correspondence	<b>Karla I. Mays</b> Typed or Printed Name of Person Mailing Correspondence	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on											
<b>11-2-04</b> (Date)	 Signature of Person Mailing Correspondence										
<b>Karla I. Mays</b> Typed or Printed Name of Person Mailing Correspondence											
CC:											

# BARNES & THORNBURG



11 South Meridian Street  
Indianapolis, Indiana, 46204  
Tel. (317) 236-1313  
Fax (317) 231-7433

## THE UNITED STATES PATENT AND TRADEMARK OFFICE

Customer No.: 23643  
Art Unit: 3751  
Confirmation No.: 3106  
Application No.: 10/643,045  
Invention: PERSONAL CARE MODULE  
Inventor: Dennis J. Gallant  
Filed: August 18, 2003  
Attorney  
Docket: 7175-73311  
Examiner: Fetsuga, Robert M.

### Certificate Under 37 CFR 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

on

(Signature)

(Printed Name)

### AMENDMENT & REPLY

Mail Stop RCE  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450  
Sir:

In response to the Office Action dated August 17, 2004, please amend the subject application as provided below, and consider the following remarks.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks** begin on page 5 of this paper.